Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF INDIANA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued	James	Brianna
	picture identification (for	First name	First name
	example, your driver's	Paul	Marie
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Barrera	Barrera
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2729	xxx-xx-5545

Debtor 1 James Paul Barrera
Debtor 2 Brianna Marie Barrera Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):					
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.					
	Include trade names and doing business as names	Business name(s)	Business name(s)					
		EINs	EINs					
5.	Where you live	4626 Fairfield Avenue	If Debtor 2 lives at a different address:					
		Fort Wayne, IN 46807 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code					
		Allen						
		County	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.					
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.						
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code					
6.	Why you are choosing this district to file for	Check one:	Check one:					
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.					
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)					

	otor 1 otor 2	James Paul Barre Brianna Marie Bar					Case number (if known)				
Par	t 2:	Tell the Court About	Your Bank	ruptcy Ca	ase						
7.	Bank	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choc	sing to file under	☐ Chapt	☐ Chapter 7							
			☐ Chapt	er 11							
			☐ Chapt	er 12							
			■ Chapt	er 13							
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local of about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashing order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit a pre-printed address.						ourself, you may pay with cash, cashier's check, or mon	ey				
					y the fee in installme ee in Installments (Off		ion, sign and attach the Application for Individuals to Pay	,			
			☐ I re	quest that is not req	at my fee be waived juired to, waive your f	(You may request this option	on only if you are filing for Chapter 7. By law, a judge ma our income is less than 150% of the official poverty line t in installments). If you choose this option, you must fill or	hat			
							icial Form 103B) and file it with your petition.				
9. Have you filed for bankruptcy within the											
	last	8 years?	☐ Yes.								
				District		When	Case number				
				District		When	Case number				
				District		When	Case number				
10.		any bankruptcy s pending or being	■ No								
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.								
				Debtor			Relationship to you				
				District		When	Case number, if known				
				Debtor			Relationship to you				
				District		When	Case number, if known				
11.		ou rent your lence?	■ No.	Go to l	line 12.						
	resid	ience :	☐ Yes.	Has yo	our landlord obtained	an eviction judgment again	st you?				
					No. Go to line 12.						
					Yes. Fill out <i>Initial</i> S this bankruptcy petit		Judgment Against You (Form 101A) and file it as part of				

tor 1 James Paul Barre tor 2 Brianna Marie Bar			Case number (if known)					
Report About Any Bu	sinesses	You Own as a Sole Proprie	tor					
Are you a sole proprietor of any full- or part-time business?	■ No.	■ No. Go to Part 4.						
	☐ Yes.	Name and location of business						
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any						
If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code					
it to this petition.	Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A))							
		-						
		- · · · · · · · · · · · · · · · · · · ·						
			er (as defined in 11 U.S.C. § 101(6))					
		-						
Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you indicate that you are as, cash-flow statement, and t	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure					
For a definition of small	■ No.	I am not filing under Chap	oter 11.					
business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy					
	☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention					
Do you own or have any	■ No.							
in the interest of the section of th	☐ Yes.							
of imminent and identifiable hazard to		What is the hazard?						
public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?						
For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs								
			Number, Street, City, State & Zip Code					
	Are you filing under chapter 11 of the Bankruptcy Code and are you a small business debtor? Are you filing under chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor? Report if You Own or Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed,	Report About Any Businesses Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). Yes.	Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). For a definition of small business debtor, see 11 U.S.C. 1116(1)(B). Report if You Own or Have Any Hazardous Property or Any Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs I where is the property?					

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Debtor 1 James Paul Barrera

Debtor 2 Brianna Marie Barrera

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 James Paul Bar otor 2 Brianna Marie B				Case nu	mber (if known)				
Par	t 6: Answer These Que	stions for R	eporting Purposes							
16.	What kind of debts do you have?	16a.	Are your debts primarily coindividual primarily for a perso			defined in 11 U.S.C. § 1	I01(8) as "incurred by an			
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you ow	ve that are not consu	mer debts or bus	iness debts				
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7	7. Go to line 18.						
	Do you estimate that after any exempt property is excluded an	☐ Yes.	I am filing under Chapter 7. Do are paid that funds will be ava				d administrative expenses			
	administrative expenses		□ No							
	are paid that funds will be available for distribution to unsecured creditors?	ed	□ Yes							
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000		□ 25,001-50,	,000			
		□ 50-99		□ 5001-10,00 □ 10,001-25,0		☐ 50,001-100				
		□ 100-1 □ 200-9		□ 10,001-25,0	000	☐ More than	☐ More than100,000			
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,0	001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		0,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million				☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	\$500,000,0	001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		00,001 - \$10 billion 000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million		01 - \$500 million					
Par	t 7: Sign Below									
For	you	I have ex	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
			chosen to file under Chapter 7, tates Code. I understand the re							
			rney represents me and I did no nt, I have obtained and read the				me fill out this			
		I request	relief in accordance with the ch	napter of title 11, Unit	ed States Code,	specified in this petition				
			and making a false statement, ocy case can result in fines up to							
		/s/ Jam	es Paul Barrera			Marie Barrera				
			Paul Barrera e of Debtor 1		Brianna Mari Signature of De					
		Executed	d on October 12, 2018		Executed on	October 12, 2018				
Executed on October 12, 2018 Executed on October 12, 2018 MM / DD / YYYYY										

Debtor 1 James Paul Barre Debtor 2 Brianna Marie Bar	· 	Case	Case number (if known)					
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petitic under Chapter 7, 11, 12, or 13 of title 11, United St for which the person is eligible. I also certify that I	ates Code, and have ex	xplained the relief available under each chapter					
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, cert schedules filed with the petition is incorrect.	tify that I have no know	ledge after an inquiry that the information in the					
	/s/ Scott Federspiel	Date	October 12, 2018					
	Signature of Attorney for Debtor		MM / DD / YYYY					
	Scott Federspiel 27546-02							
	Printed name							
	Gloyeski Law Office							
	Firm name							
	119 East Center Street Ste B1							
	Warsaw, IN 46580							
	Number, Street, City, State & ZIP Code							
	Contact phone 574-208-2900	Email address	gloyeskilawfw@hotmail.com					
	27546-02 IN							
	Bar number & State		<u> </u>					

Fill	I in this information to identify your case:			
Del	ebtor 1 James Paul Barrera			
	First Name Middle Name	Last Name		
	ebtor 2 Brianna Marie Barrera			
(Spo	ouse if, filing) First Name Middle Name	Last Name		
Uni	ited States Bankruptcy Court for the: NORTHERN DISTR	ICT OF INDIANA		
Cas	ase number			
	znown)		☐ Chec	k if this is an
			amer	nded filing
Su Be a	fficial Form 106Sum Immary of Your Assets and Liabilities as complete and accurate as possible. If two married peopremation. Fill out all of your schedules first; then complete are original forms, you must fill out a new Summary and charges.	ople are filing together, both are equally responsible for te the information on this form. If you are filing amend		
	rt 1: Summarize Your Assets			
			Your a	ecate
				of what you own
1.	Schedule A/B: Property (Official Form 106A/B)			
٠.	1a. Copy line 55, Total real estate, from Schedule A/B		\$	97,000.00
	1b. Copy line 62, Total personal property, from Schedule A	VB	\$	13,600.00
	1c. Copy line 63, Total of all property on Schedule A/B		\$	110,600.00
Par	rt 2: Summarize Your Liabilities			
			Your I	iabilities
				nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Prop	nerty (Official Form 106D)		
۷.	2a. Copy the total you listed in Column A, <i>Amount of claim</i>		\$	82,630.60
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Off 3a. Copy the total claims from Part 1 (priority unsecured c	ficial Form 106E/F)	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecure	ed claims) from line 6j of Schedule E/F	\$	45,702.80
		Your total liabilities	\$	128,333.40
			<u> </u>	
Par	rt 3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I)			
••	Copy your combined monthly income from line 12 of Schee	dule I	\$	4,401.61
5.	Schedule J: Your Expenses (Official Form 106J)			. =
	Copy your monthly expenses from line 22c of Schedule J		\$	2,701.00
Par	rt 4: Answer These Questions for Administrative and S	Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or ☐ No. You have nothing to report on this part of the form	13? n. Check this box and submit this form to the court with you	ur other sc	hedules.
	■ Voc	·		
7.	Yes What kind of debt do you have?			
	Your debts are primarily consumer debts. Consum household purpose." 11 U.S.C. § 101(8). Fill out lines	ner debts are those "incurred by an individual primarily for a 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	, family, or
	Your debts are not primarily consumer debts. You the court with your other schedules.	have nothing to report on this part of the form. Check this	box and s	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Case 18-11966-reg Doc 1 Filed 10/12/18 Page 9 of 58

Debtor 2	Brianna Marie Barrera	Case number (if known)			

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,281.36

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 James Paul Barrera

	Total clair	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	7,146.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	7,146.00

	Case	19-11900	-reg L	JOC 1	Filed 1	0/12/18	Page 10	01 56		
Fill in this inform	nation to identify you	r case and th	is filing:							
Debtor 1	James Paul Bar	rera								
D 11 0	First Name		Name		Last Name					
Debtor 2 (Spouse, if filing)	Brianna Marie B First Name		Name		Last Name					
United States Ba	nkruptcy Court for the:	NORTHER	N DISTRIC	CT OF IND	DIANA					
	. ,								_	
Case number _										Check if this is an amended filing
Official Fo	rm 106A/B									
Schedul	e A/B: Pro	perty								12/15
think it fits best. B information. If more Answer every ques	eparately list and descri e as complete and accur e space is needed, attack tion. Each Residence, Buildir	rate as possibl h a separate sh	e. If two ma heet to this	rried peop form. On t	ole are filing t he top of any	ogether, both a additional pag	re equally resp	onsible for su	pplyir	ng correct
	,	<u>, , , , , , , , , , , , , , , , , , , </u>								
_	nave any legal or equitab	ole interest in a	iny residend	e, building	g, land, or sir	nilar property?				
□ No. Go to Par										
Yes. Where is	s the property?									
1.1			What is	the proper	ty? Check all th	nat apply				
4626 Fairf	ield Avenue		Single-family home Do not							r exemptions. Put
Street address,	Street address, if available, or other description							the amount of any secured claims on Sc. Creditors Who Have Claims Secured by		
			□ M	lanufacture	d or mobile home	Current va	alue of the	Cur	rent value of the	
Fort Wayn		807-0000	=	and 			entire pro		por	tion you own?
City	State	ZIP Code	_	ivestment p imeshare	property		<u>-</u>	97,000.00		\$97,000.00
				ther			_ (such as f	ee simple, tena		wnership interest by the entireties, or
				s an interest ebtor 1 only		erty? Check one		te), if known.	ENT	IRETY
Allen				ebtor 2 only	-					
County			■ D	ebtor 1 and	d Debtor 2 only	у	- Chec	k if this is com	munit	ty property
					of the debtors		(see in	structions)		y proporty
				•	you wish to a tion number:	add about this i	tem, such as k	ocal		
	ar value of the portion ave attached for Part									\$97,000.00
Part 2: Describe	Your Vehicles									

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debtor 2 Brianna Marie Bar	era rrera	Ca	ase number (if known)	
. Cars, vans, trucks, tractors, s	port utility veh	nicles, motorcycles		
□No				
■ Yes				
— 163				
3.1 Make: GMC		Who has an interest in the property? Check one	Do not deduct secured cl	
Model: 1500		Debtor 1 only	the amount of any secure Creditors Who Have Clair	
Year: 1996		☐ Debtor 2 only		, , ,
Approximate mileage:	300,000	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other information:		\square At least one of the debtors and another		
SON DRIVES			\$1,000.00	\$1,000.00
		☐ Check if this is community property (see instructions)	\$1,000.00	φ1,000.00
3.2 Make: GMC		Who has an interest in the property? Check one	Do not deduct secured cl	
Model: SIERRA		Debtor 1 only	Creditors Who Have Clair	
Year: 2007		☐ Debtor 2 only	Current value of the	Current value of the
Approximate mileage:	160,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other information:		☐ At least one of the debtors and another		
		☐ Check if this is community property	\$8,000.00	\$8,000.00
		(see instructions)		
		d other recreational vehicles, other vehicles, an tercraft, fishing vessels, snowmobiles, motorcycle a		
Examples: Boats, trailers, motors ■ No □ Yes	s, personal wat	tercraft, fishing vessels, snowmobiles, motorcycle a	accessories	
Examples: Boats, trailers, motors No Yes Add the dollar value of the po	s, personal wat		accessories ny entries for	\$9,000.00
Examples: Boats, trailers, motors ■ No □ Yes 5 Add the dollar value of the popages you have attached for	s, personal wat ortion you ow Part 2. Write t	n for all of your entries from Part 2, including an	accessories ny entries for	\$9,000.00
Examples: Boats, trailers, motors No Yes Add the dollar value of the popages you have attached for Part 3: Describe Your Personal and	s, personal wat ortion you owi Part 2. Write t	n for all of your entries from Part 2, including an	ny entries for	Current value of the portion you own? Do not deduct secured
Examples: Boats, trailers, motors No Yes Add the dollar value of the popages you have attached for Part 3: Describe Your Personal and Do you own or have any legal or	ortion you own Part 2. Write to d Household Ite r equitable int	n for all of your entries from Part 2, including an hat number here	ny entries for	Current value of the portion you own?
Examples: Boats, trailers, motors No Yes Add the dollar value of the popages you have attached for Part 3: Describe Your Personal and Do you own or have any legal of the boats of the popages. Household goods and furnish Examples: Major appliances, furnish	ortion you own Part 2. Write t d Household Ite r equitable int	n for all of your entries from Part 2, including an hat number here	ny entries for	Current value of the portion you own? Do not deduct secured
Examples: Boats, trailers, motors No Yes No Yes Add the dollar value of the popages you have attached for pages you have attached for pages you own or have any legal or pages. Household goods and furnish Examples: Major appliances, furnish No	ortion you own Part 2. Write t d Household Ite r equitable int	n for all of your entries from Part 2, including an hat number here	ny entries for	Current value of the portion you own? Do not deduct secured
No	ortion you own Part 2. Write to d Household Ite r equitable int hings urniture, linens,	n for all of your entries from Part 2, including an hat number here	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: Boats, trailers, motors No Yes No Yes Add the dollar value of the popages you have attached for pages you have attached for pages you own or have any legal or pages. Major appliances, further No Yes. Describe HOL	ortion you own Part 2. Write t d Household Ite r equitable int hings urniture, linens,	n for all of your entries from Part 2, including an hat number hereems erest in any of the following items? china, kitchenware	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
No	ortion you own Part 2. Write t d Household Ite r equitable int hings urniture, linens,	n for all of your entries from Part 2, including an that number here	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

Official Form 106A/B Schedule A/B: Property page 2

	ebtor 1 ebtor 2	James Paul Brianna Mai			Case number (if known)	
	☐ Yes.	Describe				
9.		lent for sports a les: Sports, photo musical instr	ographic, exercise, and other hobby	equipment; bicycles, pool tables,	golf clubs, skis; canoes a	and kayaks; carpentry tools;
	☐ Yes.	Describe				
10.	■ No		s, shotguns, ammunition, and relat	ed equipment		
11.	□ No		othes, furs, leather coats, designer	wear, shoes, accessories		
			NECESSARY WEARING AF	PPAREL		\$250.00
12.	□ No		welry, costume jewelry, engageme	nt rings, wedding rings, heirloom j	ewelry, watches, gems, g	old, silver
			COSTUME JEWELRY AND	RINGS		\$500.00
13.	Exam _l □ No	nrm animals ples: Dogs, cats, Describe	birds, horses			
			2 DOGS			\$0.00
	No Yes. Add to	Give specific in the dollar value art 3. Write that	of all of your entries from Part 3, number here	, including any entries for pages		\$2,000.00
		escribe Your Finar	icial Assets legal or equitable interest in any	of the following?		Current value of the
	,	,		g		portion you own? Do not deduct secured claims or exemptions.
16.	■ No		have in your wallet, in your home, i		d when you file your petitic	on
17.	Exam		savings, or other financial accounts; If you have multiple accounts with		credit unions, brokerage h	ouses, and other similar
	□ No ■ Yes			Institution name:		

Official Form 106A/B Schedule A/B: Property page 3

	ebtor 1 ebtor 2		ul Barrera Iarie Barre			Case number (if known)	
			17.1.	CHECKING	FIFTH THIRD BANK		\$100.00
18	Examp	oles: Bond fun			okerage firms, money market accou	ints	
	☐ Yes			Institution or issuer	name:		
19	-	ublicly traded enture	l stock and	interests in incorpo	orated and unincorporated busin	esses, including an interest in	n an LLC, partnership, and
		Give specific		about them me of entity:		% of ownership:	
20	Negoti	iable instrume	nts include ¡	personal checks, cas	otiable and non-negotiable instruishiers' checks, promissory notes, and ansfer to someone by signing or del	nd money orders.	
	☐ Yes.	Give specific		about them uer name:			
21		ment or pens oles: Interests			103(b), thrift savings accounts, or ot	her pension or profit-sharing pla	ns
	■ No □ Yes.	List each acc		rely. of account:	Institution name:		
22	Your s		used deposi	ts you have made so	that you may continue service or upublic utilities (electric, gas, water),		s, or others
	■ No □ Yes.				Institution name or individua	ıl:	
23	. Annuiti	ies (A contrad	ct for a perio	dic payment of mone	ey to you, either for life or for a num	ber of years)	
	☐ Yes		Issuer nam	e and description.			
24	26 U.S.0			n an account in a q and 529(b)(1).	ualified ABLE program, or under	a qualified state tuition progra	am.
	■ No □ Yes		Institution	name and description	n. Separately file the records of any	interests.11 U.S.C. § 521(c):	
25	. Trusts, ■ No	, equitable or	future inte	rests in property (o	ther than anything listed in line 1), and rights or powers exerci	isable for your benefit
	☐ Yes.	Give specific	information	about them			
26					nd other intellectual property dos from royalties and licensing agre	eements	
		Give specific	information	about them			
27	Examp			r general intangible lusive licenses, coop	es perative association holdings, liquor	licenses, professional licenses	
	■ No □ Yes.	Give specific	information	about them			
М	oney or	property owe	ed to you?				Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

	ebtor 1 ebtor 2	James Paul Barrera Brianna Marie Barrera		C:	ase number (if known)	
28.		unds owed to you				
	□ No ■ Yes. 0	Give specific information about	hem, including whether you alread	lv filed the returns and	d the tax vears	
	_ 100.0	sive opeome information about	morn, morading whomor you alloud	y mod the returns and	a the tax years	
			2018 EIC		State and Federal	Unknown
					5505041 AND	
			2018 TAX RETURNS		FEDERAL AND STATE	Unknown
29.	Family :		ony, spousal support, child support	, maintenance, divorc	e settlement, property set	tlement
	■ No					
	⊔ Yes. (Give specific information				
30.		mounts someone owes you				
	Examp	les: Unpaid wages, disability ins benefits; unpaid loans you	surance payments, disability benefi made to someone else	ts, sick pay, vacation	pay, workers' compensat	ion, Social Security
	■ No	0				
		Give specific information				
31.		s in insurance policies les: Health, disability, or life insu	rance; health savings account (HS	SA); credit, homeowne	er's, or renter's insurance	
	■ No					
	☐ Yes. N	Name the insurance company o Company		Beneficiary	r:	Surrender or refund
						value:
32.	If you a		ou from someone who has died st, expect proceeds from a life insu	rance policy, or are c	urrently entitled to receive	property because
	■ No	Civa anacifia information				
	⊔ Yes.	Give specific information				
33.			or not you have filed a lawsuit outes, insurance claims, or rights to		or payment	
	■ No □ Yes	Describe each claim				
24			aims of every nature, including	countarolaims of the	dobtor and rights to so	t off claims
34.	■ No	ontingent and uniquidated c	anns of every nature, including	counterclaims of the	debior and rights to se	t on claims
	☐ Yes.	Describe each claim				
35.	_ `	ancial assets you did not alre	ady list			
	■ No □ Yes.	Give specific information				
		Circ oposino illiciniationi.				
36			ntries from Part 4, including any			\$100.00
D.	ort 5. Da-	oribo Any Rusiness Related Re	orty Vou Own or Hoyo on Interest In	Liet any real actots !		
			erty You Own or Have an Interest In.	<u> </u>	rail I.	
	Do you o	, , ,	interest in any business-related pro	perty?		
	Yes. G	o to line 38.				

Current value of the

Debtor 1 Debtor 2	James Paul Brianna Mar		Case number (if know	n)
				portion you own? Do not deduct secured claims or exemptions.
38. Accou	ints receivable o	r commissions you already earned		
■ No	Describe			
□ res.	Describe			
Exam _l □ No -		ishings, and supplies ated computers, software, modems, printers, copiers, fax machir	nes, rugs, telephones, des	ks, chairs, electronic devices
		COMPUTER AND PRINTER		\$500.00
□ No	nery, fixtures, eq	uipment, supplies you use in business, and tools of your tra	ade	
		ZERO TURN MOWER, FLAT TRAILER, BLOWER AN YARD TOOLS, VACCUMS	D TRIMMER,	\$2,000.00
41. Invent o ■ No □ Yes.	ory Describe			
42. Interes ■ No	sts in partnershi _l	os or joint ventures		
☐ Yes.	Give specific info	ormation about them Name of entity:	% of ownership:	
■ No.		g lists, or other compilations sonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	■ No □ Yes. Describe	·····		
■ No	usiness-related p	property you did not already list		
		of all of your entries from Part 5, including any entries for pa		\$2,500.00
		and Commercial Fishing-Related Property You Own or Have an Interented in farmland, list it in Part 1.	est In.	
	u own or have ar	y legal or equitable interest in any farm- or commercial fishi	ing-related property?	
_	Go to Part 7. S. Go to line 47.			

Official Form 106A/B Schedule A/B: Property page 6

Debte Debte			Case number (if known)	
Part 7	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	o you have other property of any kind you did not already list Examples: Season tickets, country club membership	?		
	No Yes. Give specific information			
	Add the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$97,000.00
56.	Part 2: Total vehicles, line 5	\$9,000.00	_	
57.	Part 3: Total personal and household items, line 15	\$2,000.00		
58.	Part 4: Total financial assets, line 36	\$100.00		
59.	Part 5: Total business-related property, line 45	\$2,500.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$13,600.00	Copy personal property total	\$13,600.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$110,600.00

Official Form 106A/B Schedule A/B: Property page 7

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		•		
Fill in this infor	mation to identify your	case:		
Debtor 1	James Paul Barre	era		
	First Name	Middle Name	Last Name	
Debtor 2	Brianna Marie Ba	rrera		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 106C			
Schedul	le C: The Pro	operty You C	Claim as Exempt	4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemp	otions are	you claiming?	Check one only	. even if	vour spouse is	s filina with	vou.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$97,000.00		\$38,600.00	Ind. Code § 34-55-10-2(c)(1
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	Ind. Code § 34-55-10-2(c)(2
		100% of fair market value, up to any applicable statutory limit	
\$8,000.00		\$8,000.00	Ind. Code § 34-55-10-2(c)(2
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	Ind. Code § 34-55-10-2(c)(2
		100% of fair market value, up to any applicable statutory limit	
\$250.00		\$250.00	Ind. Code § 34-55-10-2(c)(2
		100% of fair market value, up to any applicable statutory limit	
	\$97,000.00 \$1,000.00 \$1,000.00	\$1,000.00 \$1,000	\$97,000.00 \$1,000.00 \$1,000.00 \$38,000.00 \$1,000.00 \$38,000.00 \$1,000.00 \$38,000.00

Debtor Debtor				Case number (if known)	
	ief description of the property and line on chedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ECESSARY WEARING APPAREL ne from Schedule A/B: 11.1	\$250.00		\$250.00	Ind. Code § 34-55-10-2(c)(2)
				100% of fair market value, up to any applicable statutory limit	
_	OSTUME JEWELRY AND RINGS ne from Schedule A/B: 12.1	\$500.00		\$500.00	Ind. Code § 34-55-10-2(c)(2)
LII	ie IIIIII Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
_	HECKING: FIFTH THIRD BANK	\$100.00		\$100.00	Ind. Code § 34-55-10-2(c)(3)
Line i	ie IIIIII Schedule A/B. 1111			100% of fair market value, up to any applicable statutory limit	
-	tate and Federal: 2018 EIC	Unknown		100%	Ind. Code § 34-55-10-2(c)(11)
LII	ie nom Scheddie A/B. 25.1			100% of fair market value, up to any applicable statutory limit	
_	OMPUTER AND PRINTER ne from Schedule A/B: 39.1	\$500.00		\$500.00	Ind. Code § 34-55-10-2(c)(2)
L.I.	ie from Genedale A.E. GG. 1			100% of fair market value, up to any applicable statutory limit	
	ERO TURN MOWER, FLAT RAILER, BLOWER AND TRIMMER,	\$2,000.00		\$2,000.00	Ind. Code § 34-55-10-2(c)(2)
Y	ARD TOOLS, VACCUMS ne from Schedule A/B: 40.1			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption of ubject to adjustment on 4/01/19 and every 3			led on or after the date of adjustme	nt.)
		ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No □ Yes				

Fill in this information to ide	entify you	r case:			
	Paul Bar				
First Name		Middle Name Last Name			
Debtor 2 Brianna	a Marie B				
(Spouse if, filing) First Name		Middle Name Last Name			
United States Bankruptcy Cou	urt for the:	NORTHERN DISTRICT OF INDIANA			
Case number					
(if known)				☐ Check	if this is an
					led filing
					Ü
Official Form 106D					
Schedule D. Cred	ditors	Who Have Claims Secur	ed by Property	<i>i</i>	12/15
Concadio B. Gree	artor 3	Who have claims eccar	ca by 1 topolity		12/10
		f two married people are filing together, both are out, number the entries, and attach it to this form			
1. Do any creditors have claims	secured by	your property?			
_	-	nis form to the court with your other schedules	You have nothing elec to	report on this form	
_		·	. Tou have nothing else to	report on this form.	
Yes. Fill in all of the inf	formation b	pelow.			
Part 1: List All Secured C	Claims				
		nore than one secured claim, list the creditor separa		Column B	Column C
		a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name.	As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
——————————————————————————————————————	iii aipiiabelii	al order according to the creditor's marile.	value of collateral.	claim	If any
2.1 CREDIT ACCEPTAN	ICE	Describe the property that secures the claim:	\$22,000.00	\$8,000.00	\$14,000.00
Creditor's Name		2007 GMC SIERRA 160,000 miles			
05505 WEOT 40 MIL	_				
25505 WEST 12 MIL	.E	As of the date you file, the claim is: Check all that			
ROAD Southfield, MI 48034	4-1846	apply.			
		Contingent			
Number, Street, City, State & Zip	ip Code	Unliquidated			
Who owes the debt? Check on	ne.	Disputed Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or	accured		
Debtor 2 only		car loan)	Secured		
■ Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic's lien)		
☐ At least one of the debtors and	d another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to		Other (including a right to offset)			
community debt		— other (moderning a right to onest)			
Date debt was incurred 08/18	8	Last 4 digits of account number			
OUT L DOUIT			400.000.00	***	40.00
2.2 SHELL POINT Creditor's Name		Describe the property that secures the claim:	\$60,630.60	\$97,000.00	\$0.00
Creditor's Name		4626 Fairfield Avenue Fort Wayne, IN 46807 Allen County			
75 BEATTIE PLACE	:	As of the date you file, the claim is: Check all that	⊒		
Greenville, SC 2960	=	apply. Contingent			
Number, Street, City, State & Zip		☐ Unliquidated			
rumber, based, only, blate a 24	ip oodc	☐ Disputed			
Who owes the debt? Check on	ne.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or	secured		
Debtor 2 only		car loan)	Secured		
■ Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic's lien)		
☐ At least one of the debtors and	d another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to		Other (including a right to offset)			
community debt		, Jan Jan 1997			
Date debt was incurred 08/20	005	Last 4 digits of account number 433	0		

Official Form 106D

Debtor 1	James Paul Barrera			Case number (if know)	
	First Name	Middle Name	Last Name		
Debtor 2	Brianna Mari	e Barrera			
	First Name	Middle Name	Last Name		
Add the	dollar value of you	ur entries in Column A on	this page. Write that number here:	\$82,630.60	
	the last page of year number here:	our form, add the dollar va	alue totals from all pages.	\$82,630.60	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	0030 10 11300	reg Boot Theato	112/10 1 ago 21	0.00
Fill in this	information to identify your case:			
Debtor 1	James Paul Barrera			
DCDIOI 1		le Name Last Name		
Debtor 2	Brianna Marie Barrera			
(Spouse if, fili	ng) First Name Midd	e Name Last Name		
United Sta	ites Bankruptcy Court for the: NORTHE	ERN DISTRICT OF INDIANA		
Case num	ber			
(if known)				☐ Check if this is an
				amended filing
Official	Form 106E/F			
	المارية	o Uneccured Claims		12/15
	lete and accurate as possible. Use Part 1 for		2. 4.0 for 12 24 .NON	
Schedule G Schedule D left. Attach t name and c	ory contracts or unexpired leases that could in Executory Contracts and Unexpired Leases Creditors Who Have Claims Secured by Pro- the Continuation Page to this page. If you have ase number (if known).	(Official Form 106G). Do not include perty. If more space is needed, copy we no information to report in a Part,	any creditors with partially se the Part you need, fill it out, n	ecured claims that are listed in number the entries in the boxes on the
	List All of Your PRIORITY Unsecured C			
`	creditors have priority unsecured claims ag	ainst you?		
	Go to Part 2.			
☐ Yes				
Part 2:	List All of Your NONPRIORITY Unsecu	red Claims		
3. Do any	creditors have nonpriority unsecured claims	s against you?		
☐ No.	You have nothing to report in this part. Submit to	his form to the court with your other sche	edules.	
■ Yes				
unsecu	of your nonpriority unsecured claims in the red claim, list the creditor separately for each claim creditor holds a particular claim, list the other transfer of the control of the contro	aim. For each claim listed, identify what t	ype of claim it is. Do not list cla	ims already included in Part 1. If more
				Total claim
Δ	BOVE AND BEYOND COMMUNITY			
	ANAGEMENT IN	Last 4 digits of account number	4313	\$585.00
50	onpriority Creditor's Name D7 AIRPORT NORTH OFFICE	When was the debt incurred?	03/2015	
	ARK ort Wayne, IN 46825			
	imber Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
W	ho incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
de		Obligations arising out of a separeport as priority claims	ration agreement or divorce tha	at you did not
	No	Debts to pension or profit-sharing	g plans, and other similar debts	3
	Yes	■ Other. Specify JUDGMEN	Г	
·		- Outon Opoony		

Debtoi Debtoi	1 James Paul Barrera 2 Brianna Marie Barrera		Case number (if know)	
4.2	ALLEN COLLECTIONS Nonpriority Creditor's Name	Last 4 digits of account number	3956	\$550.00
	127 WEST BERRY ST STE 900 Fort Wayne, IN 46802	When was the debt incurred?	07/2007	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	Other. Specify COLLECTION	ONS	
4.3	ANTHONY WAYNE CREDIT ADJUSTERS	Last 4 digits of account number	0593	\$417.00
	Nonpriority Creditor's Name	When we the debt in some do	40/2042	
	MURPHY BUILDING STE 100 809 S CALHOUN ST	When was the debt incurred?	10/2012	
	Fort Wayne, IN 46802			
	Number Street City State Zlp Code	As of the date you file, the claim		
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharir		
	Yes	Other. Specify JUGDMEN	<u> </u>	
4.4	DIRECTV	Last 4 digits of account number	8909	\$308.00
	Nonpriority Creditor's Name C/O CONVERGENT OUTSOURCING INC	When was the debt incurred?	2012	
	800 SOUTHWEST 39TH STREEET Renton, WA 98057-4975			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only			
	☐ Debtor 2 only			
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify PAST UTIL	ІТҮ	

Debto Debto	or 1 James Paul Barrera or 2 Brianna Marie Barrera		Case number (if know)	
4.5	DISH NETWORK	Last 4 digits of account number	6124	\$830.00
	Nonpriority Creditor's Name C/O AFNI INC. PO BOX 3097	When was the debt incurred?	10/2016	7000.00
	Bloomington, IL 61702-3517 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify COLLECTION	ON	
4.6	DUPONT HOSPITAL Nonpriority Creditor's Name	Last 4 digits of account number	0109	\$1,057.00
	C/O SNOW & SAUERTEIG 203 E. BERRY STREET	When was the debt incurred?	2010	
	Fort Wayne, IN 46802 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	o plans, and other similar debts	
	☐ Yes	■ Other. Specify MEDICAL	g plants, and tallot comman costs	
4.7	ERIE INSURANCE EXCHANGE Nonpriority Creditor's Name	Last 4 digits of account number	4563	\$450.00
	100 ERIE INSURANCE PLACE Erie, PA 16530	When was the debt incurred?	2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	0 0 1	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	□ Yes	Other. Specify COLLECTION	ONS	

Debtor 2	James Paul Barrera Brianna Marie Barrera		Case number (if know)	
4.8	FELGERS PEAT MOSS	Last 4 digits of account number	4567	\$875.00
	Nonpriority Creditor's Name 9912 VALENTINE ROAD Fort Wayne, IN 46818	When was the debt incurred?	2013	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured Student loans	d claim: Iration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No No	Debts to pension or profit-sharin		
	Yes	Other. Specify COLLECTION	ONS	
	FORT WAYNE RADIOLOGY Nonpriority Creditor's Name	Last 4 digits of account number	0007	\$91.00
	C/O AMERICOLLECT, INC. PO BOX 1566 Manitowoc, WI 54221	When was the debt incurred?	2014	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify MEDICAL		
_	GRABER LUMBER	Last 4 digits of account number	4567	\$1,720.00
	Nonpriority Creditor's Name 17528 CUBA ROAD Spencerville, IN 46788	When was the debt incurred?	2014	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify COLLECTION	ONS	

Debtor :	1 James Paul Barrera 2 Brianna Marie Barrera		Case number (if know)	
4.1	INDIANA SURGICAL SPECIALISTS	Last 4 digits of account number	1731	\$515.29
1 _	Nonpriority Creditor's Name C/O BECKMAN LAWSON, LLP 201 WET WAYNE STREET	When was the debt incurred?	01/2008	
-	Fort Wayne, IN 46802 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify COLLECTION	DN	
4.1	LAWNSCAPE MANAGEMENT INC	Last 4 digits of account number	6660	\$1,329.35
	Nonpriority Creditor's Name C/O MARLIN BENSON 505 LAKE AVENUE	When was the debt incurred?	06/2017	
-	Fort Wayne, IN 46805 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt	Student loans	and the second s	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	01 ,	
	Yes	■ Other. Specify COLLECTIO	DNS	
4.1	LVNV FUNDING LLC Nonpriority Creditor's Name	Last 4 digits of account number	1907	\$500.00
	C/O CHARLIE W GORDON PO BOX 398	When was the debt incurred?	12/12	
-	Jeffersonville, IN 47131 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify COLLECTION	ON	

Debto Debto	r 1 James Paul Barrera r 2 Brianna Marie Barrera		Case number (if know)	
4.1 4	MCKENZIE LAWN	Last 4 digits of account number	5678	\$825.00
	Nonpriority Creditor's Name	When was the debt incurred?	2015	
	Spencerville, IN 46788	When was the dest mounted.		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify COLLECTIO	DNS	
4.1	MIDLAND FUNDING LLC	Last 4 digits of account number	8351	\$980.00
J	Nonpriority Creditor's Name	_		
	2365 NORTHSIDE DRIVE SUITE 300	When was the debt incurred?	05/2010	
	San Diego, CA 92108 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	7.0 or the date you me, the claim.	o. Oncok all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify JUDGMEN		
4.1 6	MOHELA/DEPT OF ED	Last 4 digits of account number	6139	\$7,146.00
	Nonpriority Creditor's Name 633 SPRINT DRIVE	When was the debt incurred?	09/2001	
	CHESTERFIELD, IL 60335-1243 Number Street City State Zlp Code	As of the date you file, the claim i	Charle all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim i	S. Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	_	g primite, and a since	
	— 163	STUDENT I		

2 Brianna Marie Barrera		Case number (if know)	
PARKVIEW MEMORIAL HOSPITAL	Last 4 digits of account number	MULTIPLE ACCOUNTS	\$2,000.00
Nonpriority Creditor's Name C/O MSCB INCORPORATED 1410 INDUSTRIAL PARK ROAD	When was the debt incurred?	2013	
PARIS, TN 38424 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	Other. Specify MEDICAL		
PARKVIEW MEMORIAL HOSPITAL	Last 4 digits of account number	3131	\$532.00
Nonpriority Creditor's Name C/O MSCB INC. PO BOX 1567	When was the debt incurred?	06/2014	
Paris, TN 38242 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify COLLECTION	ON	
PFISTER SPRINKLER SYSTEMS	Last 4 digits of account number	6656	\$4,000.00
Nonpriority Creditor's Name PO BOX 99	When was the debt incurred?	10/2014	
Roanoke, IN 46783 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
_	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u 0.u	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	action agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify JUDGMEN	Т	

Debtor Debtor	1 James Paul Barrera 2 Brianna Marie Barrera		Case number (if know)	
4.2 0	PREMIER AUTO	Last 4 digits of account number	4561	\$3,500.00
	Nonpriority Creditor's Name 918 SOUTH ANTHONY BOULEVARD	When was the debt incurred?	2018	
	Fort Wayne, IN 46803 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify AUTO REP	0	
4.2	PROFESSIONAL EMERGENCY PHYSICIANS	Last 4 digits of account number	MULTIPLE ACCOUNTS	\$1,150.00
	Nonpriority Creditor's Name C/O PROFESSIONAL RECOVERY 7319 W. JEFFERSON BLVD	When was the debt incurred?	2013	
	Fort Wayne, IN 46804 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify MEDICAL		
4.2	SNOW & SAUERTEIG	Last 4 digits of account number	1163	\$2,319.00
	Nonpriority Creditor's Name 203 E BERRY ST STE 1100	When was the debt incurred?	12/2014	
	Fort Wayne, IN 46802 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify JUDGMEN	<u> </u>	

Brianna Marie Barrera		Case number (if know)	
ST JOE HEALTH SYSTEMS	Last 4 digits of account number	4561	\$1,049.10
Nonpriority Creditor's Name C/O SNOW&SAUERTEIG LLP 203 EAST BERRY STREET Fort Wayne, IN 46808	When was the debt incurred?	08/20/2018	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify MEDICAL		
ST JOSEPH HOSPITAL	Last 4 digits of account number	9626	\$2,250.00
Nonpriority Creditor's Name C/O SNOW & SAUERTEIG 203 EAST BERRY STREET SUITE 1310	When was the debt incurred?	2009	
Fort Wayne, IN 46802 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify MEDICAL		
ST JOSEPH HOSPITAL	Last 4 digits of account number	4501	\$1,190.00
Nonpriority Creditor's Name C/O SNOW & SAUERTEIG 203 EAST BERRY STREET	When was the debt incurred?	05/2014	
Fort Wayne, IN 46802 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
Yes	Other. Specify COLLECTION	ON	

r 1 James Paul Barrera r 2 Brianna Marie Barrera		Case number (if know)	
SUMMIT RADIOLOGY	Local delicito of account number	MULTIPLE	\$130.00
Nonpriority Creditor's Name	Last 4 digits of account number	ACCOUNTS	φ130.00
C/O SNOW & SAUERTEIG 203 EAST BERRY STREET	When was the debt incurred?	2013	
Fort Wayne, IN 46802 Number Street City State Zlp Code	As of the date you file, the claim	is. Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneck all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify MEDICAL		
SUMMIT RADIOLOGY	Last 4 digits of account number	1300	\$62.0
Nonpriority Creditor's Name			402.0
PO BOX 2630 Fort Wayne, IN 46801	When was the debt incurred?	07/2013	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	Student loans		
Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify COLLECTION		
SWISS COLONY / MONTGOMER	Last 4 digits of account number		\$422.0
Nonpriority Creditor's Name 1515 S 21ST Clinton, IA 52732	When was the debt incurred?	05/2015	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing		
Yes	■ Other. Specify CREDIT CA	ARD	

Debtor 2	James Paul Barrera Brianna Marie Barrera		Case number (if know)	
4.2 9	WELLS FARGO BANK AUTO	Last 4 digits of account number	4569	\$4,460.00
	Nonpriority Creditor's Name PO BOX 29704 Phoenix, AZ 85038	When was the debt incurred?	09/2005	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify AUTO LOA	N	
4.3	WELLS FARGO LOSS RECOVERY	Last 4 digits of account number	5023	\$4,460.00
	Nonpriority Creditor's Name PO BOX 29704	When was the debt incurred?	09/2005	V 1, 100100
	Phoenix, AZ 85038			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	По :: .		
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
	☐ Yes	Other. Specify CHARGE C)FF	
is tryin have n notifie	List Others to Be Notified About a Dris page only if you have others to be notified ag to collect from you for a debt you owe to snore than one creditor for any of the debts the deforming the debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that your bankruptcy, for a debt that your bankruptcy, for a debt that you listed in Parts 1 or 2, list the addion submit this page.	n Parts 1 or 2, then list the collection agency tional creditors here. If you do not have add	here. Similarly, if you
	nd Address I C. HECK	On which entry in Part 1 or Part 2 did you Line 4.11 of (<i>Check one</i>):	list the original creditor? IPart 1: Creditors with Priority Unsecured Clair	me
02D01	-0801-SC-001731 THOUSE BOX 0026		Part 2: Creditors with Nonpriority Unsecured	
Fort W	/ayne, IN 46802	Last 4 digits of account number		
Name an	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	SIFIED CONSULTANTS	Line 4.5 of (Check one):	Part 1: Creditors with Priority Unsecured Clain	ms
	DEERWOOD PARK BLVD pnville, FL 32256	•	Part 2: Creditors with Nonpriority Unsecured	Claims
oachst	511VIII.C, 1 L 32230	Last 4 digits of account number		
JAMES 02D01- 8605 B	nd Address S D BOSCIA -1005-SC-008351 BROADWAY		list the original creditor? Part 1: Creditors with Priority Unsecured Clair Part 2: Creditors with Nonpriority Unsecured	
werrill	ville, IN 46410	Last 4 digits of account number		
Name an	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	

Debtor 1 James Paul Barrera Debtor 2 Brianna Marie Barrera		Case number (if know)
PERRY LAW OFFICE 02D01-1503-SC-004313 5532 SAINT JOE ROAD Fort Wayne, IN 46835	Line 4.1 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Tort wayne, in 40055	Last 4 digits of account number	
Name and Address ROBERT JOHN WRAY 02D02-1410-SC-016656 5750 COVENTRY LANE B-5 Fort Wayne, IN 46804	On which entry in Part 1 or Part 2 did y Line 4.19 of (<i>Check one</i>):	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address SARAH LOUISE BLAKE 02D01-1210-SC-020593 COURTHOUSE BOX 0008 Fort Wayne, IN 46802	On which entry in Part 1 or Part 2 did y Line 4.3 of (<i>Check one</i>):	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
. o,	Last 4 digits of account number	
Name and Address SNOW & SAUERTEIG COLLECT 203 E BERRY ST Fort Wayne, IN 46802	On which entry in Part 1 or Part 2 did y Line 4.27 of (Check one): Last 4 digits of account number	rou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address THOMAS L. STUCKY COURTHOUSE BOX 0007 Fort Wayne, IN 46802	On which entry in Part 1 or Part 2 did y Line 4.2 of (Check one): Last 4 digits of account number	rou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	7,146.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	38,556.80
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	45,702.80

Case 18-11966-reg Doc 1 Filed 10/12/18 Page 33 of 58

Fill in this information to identify your case:								
Debtor 1								
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the: NORTHERN DISTRICT OF INDIANA								
Case number								
(if known)						Check if this is an		
						amended filing		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

I	Person or	company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for			
2.1								
	Name							
	Number	Street			_			
	City		State	ZIP Code	<u> </u>			
2.2								
	Name							
	Number	Street						
	City		State	ZIP Code	_			
2.3								
	Name							
	Number	Street			_			
	City		State	ZIP Code	_			
2.4	,							
	Name				_			
	Number	Street			_			
	City		State	ZIP Code	_			
2.5								
	Name				_			
	Number	Street			<u> </u>			
	City		State	ZIP Code	_			

Official Form 106G

Fill in this	s information to identify	your case:			
Debtor 1	James Paul				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	Brianna Mar	ie Barrera Middle Name	Last Name		
	3/				
United St	ates Bankruptcy Court for	the: NORTHERN DISTRIC	CT OF INDIANA		
Case nun	nber				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106H				
	dule H: Your C	`odobtore			40/45
Scrie	dule II. Toul C	ouebioi 5			12/15
•	`	nown). Answer every questions? (If you are filing a joint case		as a codebtor.	-
■ No					
☐ Ye					
		re you lived in a community siana, Nevada, New Mexico, F			es and territories include
	,,,			g,	
`	. Go to line 3.				
⊔ Ye	s. Did your spouse, forme	er spouse, or legal equivalent li	ve with you at the time?		
in lin Form	e 2 again as a codebtor	only if that person is a guara	antor or cosigner. Make	sure you have listed the cre	n you. List the person shown editor on Schedule D (Official dule E/F, or Schedule G to fill
	Column 1: Your codebto Name, Number, Street, City, State			Column 2: The creditor Check all schedules tha	to whom you owe the debt t apply:
3.1				☐ Schedule D. line	
3.1	Name			_ ☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street			_	
	City	State	ZIP Code		
				Oahadala D. Par	
3.2	Name			_ ☐ Schedule D, line _ ☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street				
	City	State	ZIP Code		

Fill	in this information to iden	ntify your ca	ase:					
		nes Paul						
1	btor 2 Bria	anna Mar	ie Barrera					
Ca	ited States Bankruptcy Co se number nown)	ourt for the	NORTHERN DISTRIC	ET OF INDIANA		neck if this is:		chaptor
_	fficial Form 100						as of the following date:	12/15
Be sup spo atta	as complete and accuration plying correct informations. If you are separated the aseparate sheet to the separate sheet	te as poss on. If you d and you his form.	sible. If two married peo are married and not filir r spouse is not filing wi	ple are filing together (D ng jointly, and your spou th you, do not include in onal pages, write your n	ise is living w iformation ab	ith you, inclu out your spo	ude information about youse. If more space is n	ble for your eeded,
Pa	rt 1: Describe Emp	oloyment						
1.	Fill in your employment information.	nt		Debtor 1		Debtor 2	or non-filing spouse	
	If you have more than o		Employment status	■ Employed		■ Employed		
	attach a separate page information about additi			☐ Not employed		☐ Not employed		
	employers.		Occupation	DISABLED		LAWN	CARE BUSINESS	
	Include part-time, seaso self-employed work.	onal, or	Employer's name					
	Occupation may include or homemaker, if it appl		Employer's address	IN		IN 468	07	
			How long employed the	here?				
Pa	rt 2: Give Details A	About Mor	ithly Income					
Est		s of the da	•	you have nothing to report	for any line, w	rite \$0 in the	space. Include your non-	-filing
	ou or your non-filing spous e space, attach a separat			ombine the information for	all employers	or that perso	on on the lines below. If y	ou need
					For I	Debtor 1	For Debtor 2 or	

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

			non-filing spouse		
2.	\$	0.00	\$	0.00	
3.	+\$	0.00	+\$	0.00	
4.	\$	0.00	\$_	0.00	

Official Form 106I Schedule I: Your Income page 1

James Paul Barrera Debtor 1 Debtor 2 **Brianna Marie Barrera** Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 0.00 0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 0.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ \$ 0.00 0.00 Other deductions. Specify: 5h. 5h.+ 0.00 \$ 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 7 0.00 0.00 8 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a \$ 0.00 3,281.36 8h. Interest and dividends 8h. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. 0.00 \$ 0.00 Specify: 8g. 8g. Pension or retirement income \$ \$ 0.00 0.00 Other monthly income. Specify: PRORATED TAXES 8h.+ \$ \$ 8h. 508.25 0.00 SOCIAL SECURITY FOR KIDS \$ 612.00 \$ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 1,120.25 \$ 3,281.36 10. \$ 10. Calculate monthly income. Add line 7 + line 9. \$ 1,120.25 3,281.36 \$ 4,401.61 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 Specify: 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 4,401.61 12. applies Combined monthly income Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain: WIFE RUNS A BUSINESS LAWN CARE BUSINESS. HUSBAND JUST GOT APPROVED FOR SOCIAL SECURITY, FIRST PAYMENT WILL BE IN NOVEMBER AT \$1227, CHILDRENS INCOME IS IN SCHEDULE I. Co-Debtor's business is seasonal, and typically earns approximately \$1,800 to \$2,000 per month in

December, January, February.

Fill	in this informa	ation to identify yo	our case:	·				
Deb	tor 1	James Paul	Barrera			Checl	k if this is:	
						_	An amended filing	
	tor 2 ouse, if filing)	Brianna Mar	ie Barrer	<u>a</u>				wing postpetition chapter the following date:
Unit	ed States Bank	ruptcy Court for the	: NORTH	HERN DISTRICT OF INDIA	NA	1	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	orm 106J				I		
Sc	chedule	J: Your	Exper	nses				12/1
Be a	as complete ormation. If n mber (if know	and accurate as	s possible eded, atta ry questio	. If two married people ar				
1.	Is this a joi		iloid					
	☐ No. Go to	o line 2.						
	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N		st file Offici	ial Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Debte	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			DAUGHTER		13	Yes
					DAUGHTER		14	□ No ■ Yes
					<u> </u>			■ res □ No
					SON		18	■ Yes
								□ No
3.	expenses of	penses include of people other to d your depende	han $_{m \Box}$	No Yes				☐ Yes
Par		nate Your Ongoi						
exp		a date after the l		uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses
4.		or home owners		nses for your residence. In or lot.	nclude first mortgage	e 4. \$		0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
	4b. Prope	erty, homeowner's				4b. \$		0.00
		e maintenance, re eowner's associat		upkeep expenses		4c. \$ 4d. \$		100.00
	4u. ⊓ome	owner s associat	TOLL OF CODE	aominiam aues		4u. \$		0.00

0.00

Additional mortgage payments for your residence, such as home equity loans

	tor 1 James Paul Barrera tor 2 Brianna Marie Barrera	Case num	ber (if known)	
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	271.00
	6b. Water, sewer, garbage collection	6b.	·	80.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		140.00
	6d. Other. Specify:	6d.		0.00
7.	Food and housekeeping supplies		·	850.00
8.	Childcare and children's education costs	8.	·	120.00
9.	Clothing, laundry, and dry cleaning	9.	\$	200.00
10.		10.		140.00
11.	Medical and dental expenses	11.	\$	200.00
12.	Transportation. Include gas, maintenance, bus or train fare.			
	Do not include car payments.	12.	\$	400.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.	45-	œ.	0.00
	15a. Life insurance	15a.	·	0.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.	·	100.00
40	15d. Other insurance. Specify:	15d.	>	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	·	0.00
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		·	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on School			
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.	·	0.00
21.	Other: Specify: PET FOOD AND SUPPLIES	21.	+\$	50.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	2,701.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,701.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,401.61
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,701.00
	23c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	1,700.61
24.	Do you expect an increase or decrease in your expenses within the year after your for example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? ■ No. □ Yes. Explain here:			or decrease because of a
	Troo.			

Fill in this infor	mation to identify your	case:		
Debtor 1	James Paul Barre	era		
	First Name	Middle Name	Last Name	
Debtor 2	Brianna Marie Ba			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA	
Case number				
(if known)				☐ Check if this is an amended filing
If two married po You must file thi obtaining mone	eople are filing togethers form whenever you f	r, both are equally respo ile bankruptcy schedules n connection with a banl		
Sig	n Below			
Did you pa	y or agree to pay some	eone who is NOT an attor	ney to help you fill out bankruptcy f	orms?
■ No				
☐ Yes. I	Name of person			tach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
	alty of perjury, I declare te true and correct.	that I have read the sum	mary and schedules filed with this c	leclaration and
X /s/.lan	nes Paul Barrera		X /s/ Brianna Marie Bar	rera
James	Paul Barrera		Brianna Marie Barrer Signature of Debtor 2	
o.g.iata			0.g.ia.a.o 0. 205101 2	
Date	October 12, 2018		Date October 12, 20	18

	l in this inform					
		nation to identify you				
De	btor 1	James Paul Barı First Name	rera Middle Name	Last Name		
De	btor 2	Brianna Marie B	arrera			
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF INDIANA		
	se number				_	heck if this is an mended filing
St Be info	as complete a	of Financial	attach a separate sheet to	re filing together, both are	equally responsible for sup y additional pages, write you	
	<u> </u>	,	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	■ Married □ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
3. stat					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Ol	ficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,100.00	■ Wages, commissions, bonuses, tips	\$30,000.00
			☐ Operating a business		Operating a business	

Official Form 107

Debtor 1	Brianna Marie				Cas	e number (if known)		
		Debte	or 1			Debtor 2		
		Source	ces of income k all that apply.	Gross i (before exclusion	deductions and	Sources of ind Check all that a		Gross income (before deductions and exclusions)
	calendar year: y 1 to December 31		ages, commissions, ses, tips		\$15,000.00	■ Wages, combonuses, tips	nmissions,	\$15,000.00
		■ Op	perating a business			Operating a	business	
	calendar year befo y 1 to December 31	2016) - ***	ages, commissions, ses, tips		\$42,920.00	■ Wages, combonuses, tips	nmissions,	\$15,000.00
		■ Op	perating a business			Operating a	business	
	,	gross income from	ou have income that y	•		•		
		Debto	or 1			Debtor 2		
		Source	ees of income ibe below.	each so	deductions and	Sources of inc Describe below		Gross income (before deductions and exclusions)
6. Are €	No. Neither Deb individual pri During the 90 No. Or Yes In the Subject to Yes. Debtor 1 or During the 90	tor 1 nor Debtor 2 marily for a person 0 days before you Go to line 7. List below each cre- paid that creditor. I not include payment adjustment on 4/0 Debtor 2 or both	s primarily consumer has primarily consumer has primarily consumal, family, or household filed for bankruptcy, direction to whom you paid to not include payments to an attorney for the 1/19 and every 3 years have primarily consumal filed for bankruptcy, directions.	umer debts old purpose. id you pay a id a total of nts for dome his bankrup s after that umer debts	" \$6,425* or more estic support obliques case. for cases filed on	al of \$6,425* or mo in one or more pay gations, such as ch or after the date o	re? yments and t nild support a of adjustment	ind alimony. Also, do
	■ Yes	ist below each cre						t creditor. Do not include payments to an
Cre	ditor's Name and	Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for
255	EDIT ACCEPTAN 505 WEST 12 MIL uthfield, MI 4803	E ROAD	MONTHLY		\$360.00	\$22,000.00	☐ Mortgag ☐ Car ☐ Credit (☐ Loan R ☐ Supplie ☐ Other_	Card epayment ers or vendors

		mes Paul Barrera ianna Marie Barrera		Cas	se number (if known)			
	Insiders in of which yo	ear before you filed for bankrupte clude your relatives; any general pa ou are an officer, director, person in s you operate as a sole proprietor. 1	ortners; relatives of any gene control, or owner of 20% or	eral partners; partners or more of their votin	erships of which you	ou are a general partner; corporations ny managing agent, including one for		
	■ No □ Yes.	List all payments to an insider.						
	Insider's	Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment		
	insider?	rear before you filed for bankruptoryments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a debt that benefited an		
	_	List all payments to an insider						
	Insider's	Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name		
Par	t 4: Ider	ntify Legal Actions, Repossession	ns, and Foreclosures					
	List all suc modification	ear before you filed for bankrupton the matters, including personal injuryons, and contract disputes. Fill in the details.						
	Case title		Nature of the case	Court or agency		Status of the case		
	VS BRIA	A SURGICAL SPECIALIST ANNA M BARRERA 801-SC-001731	COLLECTION	ALLEN SUPERIOR COURT 9 1 WEST SUPERIOR STREET Fort Wayne, IN 46802 ALLEN SUPERIOR COURT 2 1 WEST SUPERIOR STREET Fort Wayne, IN 46802 ALLEN SUPERIOR COURT 9 1 WEST SUPERIOR STREET Fort Wayne, IN 46802		■ Pending □ On appeal □ Concluded		
	JAMES	ID FUNDING LLC VS. BARRERA 005-SC-008351	COLLECTION			☐ Pending ☐ On appeal ■ Concluded JUDGMENT		
	ADJUS1	NY WAYNE CREDIT TERS VS JAMES BARRERA 210-SC-020593	COLLECTIONS			☐ Pending ☐ On appeal ☐ Concluded		
						JUDGMENT		
	INC V J	R SPRINKLER SYSTEMS, AMES BARRERA 410-SC-016656	COLLECTION	ALLEN SUPERIOR COURT 2 1 WEST SUPERIOR STREET Fort Wayne, IN 46802		2 ☐ On appeal 1 WEST SUPERIOR STREET Fort Wayne IN 46802		☐ Pending ☐ On appeal ■ Concluded JUDGMENT
	MANAG BRIANN	& BEYOND COMMUNITY EMENT INC V JAMES AND IA BARRERA 503-SC-004313	COLLECTION	ALLEN SUPER 1 1 WEST SUPE STREET Fort Wayne, IN	RIOR	☐ Pending ☐ On appeal ■ Concluded JUDGMENT		

	otor 1 James Paul Barrera otor 2 Brianna Marie Barrera		Case number (if	known)	
	Case title Case number	Nature of the case	Court or agency	Status of th	ne case
	ALLEN COLLECTIONS INC VS. BRIANNA M BARRERA 02D01-0707-SC-013956	COLLECTIONS	ALLEN SUPERIOR COUR 2 1 WEST SUPERIOR STREET Fort Wayne, IN 46802	Pending On appe	eal
	SNOW & SAUERTEIG LLP V BRIANNA M BARRERA 02D01-1412-SC-021163	COLLECTIONS	ALLEN SUPERIOR COUR 1 1 WEST SUPERIOR STREET Fort Wayne, IN 46802	Pending On appe	eal led
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		perty repossessed, foreclosed,	garnished, attache	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date	Value of the
		Explain what happene	ed		property
	PREMIER AUTO 918 SOUTH ANTHONY BOULEVARD Fort Wayne, IN 46803	2008 BUICK ENCLA ■ Property was reposs □ Property was foreclo □ Property was garnish	essed.	2018	\$3,500.00
		☐ Property was attached			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		cluding a bank or financial insti	itution, set off any a	amounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date action was taken	Amount
	ASSOCIATION DUES?	Last 4 digits of account	number:	2/2016	\$0.00
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an No Yes List Certain Gifts and Contributions		perty in the possession of an as	signee for the bend	efit of creditors, a
13.	Within 2 years before you filed for bankrup	cy, did you give any gif	ts with a total value of more tha	nn \$600 per person	?
	☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	5	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				

	otor 1 James Paul Barrera otor 2 Brianna Marie Barrera		Case number	er (if known)	
14.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift or contr		ontributions with a to	otal value of more than	\$600 to any charity?
	Gifts or contributions to charities that tota more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		ributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankruptc or gambling?	y or since you filed for bankru	ptcy, did you lose ar	ything because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	how the loss occurred Inc	escribe any insurance coverage clude the amount that insurance surance claims on line 33 of <i>Sch</i>	has paid. List pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers				
	Within 1 year before you filed for bankruptc; consulted about seeking bankruptcy or preinclude any attorneys, bankruptcy petition prepinclude any attorneys. Dankruptcy petition prepinclude any attorneys. No Yes. Fill in the details. Person Who Was Paid	paring a bankruptcy petition? arers, or credit counseling agen Description and value o	cies for services requi	red in your bankruptcy. Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You	transferred		or transfer was made	payment
	Gloyeski Law Office 119 East Center Street Ste B1 Warsaw, IN 46580 gloyeskilawfw@hotmail.com	Attorney Fees		2017	\$985.00
17.	Within 1 year before you filed for bankruptc; promised to help you deal with your credito Do not include any payment or transfer that you	rs or to make payments to you		y or transfer any prope	rty to anyone who
	■ No Yes Fill in the details				
	Person Who Was Paid Address	Description and value o transferred	f any property	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankrupte transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No	usiness or financial affairs? ade as security (such as the grai	• •		
	Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and value o property transferred	paymen	e any property or its received or debts exchange	Date transfer was made
	Person's relationship to you			J	

	btor 2 Brianna Marie Barrera			Case num	nber (if known)	
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		ny property to a	a self-settle	ed trust or similar device	of which you are a
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer was made
Pa	rt 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and S	torage Uni	ts	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated No	r other financial accou	nts; certificate	s of deposi		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfe
21.	Do you now have, or did you have within 1 y cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution	rear before you filed fo			posit box or other depos	sitory for securities, Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, S State and ZIP Code)		Describe	the contents	have it?
22.	Have you stored property in a storage unit o No Yes. Fill in the details.	or place other than you	r home within 1	l year befo	re you filed for bankrupt	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Pa	rt 9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that sor for someone.	neone else owns? Incl	ude any prope	rty you bor	rowed from, are storing	for, or hold in trust
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proj (Number, Street, City, S Code)			the property	Value
	JAMIE COUR	4646 FAIRFIEL Fort Wayne, IN		RENTIN MOWER	G A ZERO TURN	\$1,500.00

James Paul Barrera Debtor 1 Debtor 2 **Brianna Marie Barrera**

Part 10: Give Details About Environmental Information

Case number (if known)

For the purpose of Part 10, the following definitions apply:
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, re

- eases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

	to own, operate, or utilize it, including di	sposai sites.									
	Hazardous material means anything an e hazardous material, pollutant, contamina	environmental law defines as a hazardous ant, or similar term.	waste, hazardous substance, toxic	substance,							
Rep	port all notices, releases, and proceedings	that you know about, regardless of when	they occurred.								
24.	Has any governmental unit notified you t	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice							
25.	Have you notified any governmental unit	of any release of hazardous material?									
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice							
26.	Have you been a party in any judicial or a	administrative proceeding under any envi	ronmental law? Include settlements	and orders.							
	■ No □ Yes. Fill in the details.										
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case							
Par	rt 11: Give Details About Your Business	or Connections to Any Business									
27.	Within 4 years before you filed for bankr	uptcy, did you own a business or have an	y of the following connections to an	y business?							
	■ A sole proprietor or self-employe	ed in a trade, profession, or other activity,	either full-time or part-time								
	☐ A member of a limited liability co	mpany (LLC) or limited liability partnershi	ip (LLP)								
	☐ A partner in a partnership										
	☐ An officer, director, or managing executive of a corporation										
	☐ An owner of at least 5% of the voting or equity securities of a corporation										
	□ No. None of the above applies. Go to Part 12.										
	■ Yes. Check all that apply above and fill in the details below for each business.										
	Business Name Address	Describe the nature of the business	Employer Identification numbe Do not include Social Security								
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed								
	WILLOW ESTATE MANAGEMENT 4626 FAIRFIELD AVE	LANDSCAPING	EIN:								
	Fort Wayne IN 46807	N/A	From-To 2011 TO PRESEN	Т							

Official Form 107

N/A

Fort Wayne, IN 46807

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No	Debtor 2	James Paul Barrera Brianna Marie Barrera		Case number (if known)	
Yes. Fill in the details below. Name			tcy, did you give a fin	ancial statement to anyone about your business? Include all financial	
Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ James Paul Barrera James Paul Barrera James Paul Barrera Signature of Debtor 1 Date October 12, 2018 Date October 12, 2018 Date October 12, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?		1.7			
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. 1/s/ James Paul Barrera James Paul Barrera James Paul Barrera Signature of Debtor 1 Date October 12, 2018 Date October 12, 2018 Date October 12, 2018 Did you attach additional pages to <i>Your Statement of Financial Affairs for Individuals Filing for Bankruptcy</i> (Official Form 107)? No Odi you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Ad	dress	Date Issued		
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. 1/s/ James Paul Barrera James Paul Barrera James Paul Barrera Signature of Debtor 1 Date October 12, 2018 Date October 12, 2018 Date October 12, 2018 Did you attach additional pages to <i>Your Statement of Financial Affairs for Individuals Filing for Bankruptcy</i> (Official Form 107)? No Odi you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Part 12	Sign Below			
Signature of Debtor 1 Date October 12, 2018 Date October 12, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No				caming property; or catamining memory or property ary mada in commission	١
Date October 12, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No	18 U.S.C	. §§ 152, 1341, 1519, and 3571.	\$250,000, or impriso	ment for up to 20 years, or both.	1
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No	18 U.S.C	es Paul Barrera	\$250,000, or impriso	ment for up to 20 years, or both. Marie Barrera	1
■ No □ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No	18 U.S.C /s/ Jan James	s. §§ 152, 1341, 1519, and 3571. Hes Paul Barrera Paul Barrera	\$250,000, or imprison /s/ Briann Brianna M	ment for up to 20 years, or both. Marie Barrera arie Barrera	1
☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No	/s/ Jan James Signatu	es Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Barrera	\$250,000, or imprison /s/ Briann Brianna N Signature o	ment for up to 20 years, or both. Marie Barrera arie Barrera f Debtor 2	1
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No	/s/ Jan James Signatu Date	es Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Cotober 12, 2018	\$250,000, or imprison /s/ Briann Brianna N Signature of	ment for up to 20 years, or both. Marie Barrera arie Barrera f Debtor 2 tober 12, 2018	1
■ No	/s/ Jan James Signatu Date Did you	es Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Cotober 12, 2018	\$250,000, or imprison /s/ Briann Brianna N Signature of	ment for up to 20 years, or both. Marie Barrera arie Barrera f Debtor 2 tober 12, 2018	1
	/s/ James Signate Date _ Did you ■ No	es Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Barrera Paul Cotober 12, 2018	\$250,000, or imprison /s/ Briann Brianna N Signature of	ment for up to 20 years, or both. Marie Barrera arie Barrera f Debtor 2 tober 12, 2018	
	/s/ James Signatu Date Did you No Yes Did you	e. §§ 152, 1341, 1519, and 3571. These Paul Barrera Paul Barrera The of Debtor 1 October 12, 2018 The additional pages to Your Statem	\$250,000, or imprison /s/ Briann Brianna N Signature of Date Occupant ent of Financial Affair	Marie Barrera arie Barrera f Debtor 2 tober 12, 2018 s for Individuals Filing for Bankruptcy (Official Form 107)?	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
	+ \$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
_	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Indiana

In	re	James Paul B Brianna Marie					Case No.		
					Debtor(s)	Chapter	13	
1.		rsuant to 11 U .S.0	C. § 329(a) and Fe	d. Bankr. P. 2016	SNSATION OF 6(b), I certify that I at ng of the petition in b	n the attorney for t	the above nan	ned debtor(s) and	
					of or in connection v				ces rendered or to
		•	es, I have agreed t	*			\$	4,000.00	
		Prior to the filir	ng of this statemen	t I have received			\$	985.00	
		Balance Due					\$	3,015.00	
2.	The	e source of the co	mpensation paid to	me was:					
		Debtor	☐ Other (spec	cify):					
3.	The	e source of compe	ensation to be paid	to me is:					
		Debtor	☐ Other (spec	cify):					
4.		I have not agree	d to share the abov	re-disclosed com	pensation with any of	her person unless	they are mem	bers and associa	ites of my law firm.
					sation with a person of the people sh				my law firm. A
5.	In	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
a. Analysis of the debtor's financial situation, and rendering adv.b. Preparation and filing of any petition, schedules, statement ofc. Representation of the debtor at the meeting of creditors and co.d. [Other provisions as needed]					tement of affairs and	plan which may b	e required;	-	bankruptcy;
		Negotiation reaffirmat	ons with secure tion agreements	and application	reduce to market ons as needed; pr ousehold goods.				
5.	Ву	Represen		btors in any di	ee does not include th schargeability act			es, relief from	stay actions or
					CERTIFICATION)N			
this		ertify that the fore kruptcy proceedir		te statement of ar	ny agreement or arran	gement for payme	nt to me for r	representation of	the debtor(s) in
	Oct	ober 12, 2018				t Federspiel			
	Date	?				ederspiel 27546	-02		
						e of Attorney ki Law Office			
					119 Eas	t Center Street	Ste B1		
						, IN 46580 -2900 Fax: 574	-268-2700		
						-2900 Fax. 574 ilawfw@hotmai			
					Name of				
_	_								

(6/2010)

United States Bankruptcy Court

Northern District of Indiana						
In re	James Paul Barrera Brianna Marie Barrera	Delarge	Case No.			
		Debtor(s)	Chapter	13		
	VERIF	FICATION OF CREDITOR N	MATRIX			
	e above-named debtor(s) verifies und knowledge.	der penalty of perjury that the attached list o	f creditors is tru	e and correct to the best of		
Date:	October 12, 2018	/s/ James Paul Barrera				
		James Paul Barrera				
		Signature of Debtor				
Date:	October 12, 2018	/s/ Brianna Marie Barrera				

Brianna Marie Barrera Signature of Debtor

ABOVE AND BEYOND COMMUNITY MANAGEMENT IN 507 AIRPORT NORTH OFFICE PARK FORT WAYNE, IN 46825

ALLEN COLLECTIONS 127 WEST BERRY ST STE 900 FORT WAYNE, IN 46802

ANTHONY WAYNE CREDIT ADJUSTERS MURPHY BUILDING STE 100 809 S CALHOUN ST FORT WAYNE, IN 46802

BRIAN C. HECK 02D01-0801-SC-001731 COURTHOUSE BOX 0026 FORT WAYNE, IN 46802

CREDIT ACCEPTANCE 25505 WEST 12 MILE ROAD SOUTHFIELD, MI 48034-1846

DIRECTV C/O CONVERGENT OUTSOURCING INC 800 SOUTHWEST 39TH STREEET RENTON, WA 98057-4975

DISH NETWORK C/O AFNI INC. PO BOX 3097 BLOOMINGTON, IL 61702-3517

DIVERSIFIED CONSULTANTS 10550 DEERWOOD PARK BLVD JACKSONVILLE, FL 32256

DUPONT HOSPITAL C/O SNOW & SAUERTEIG 203 E. BERRY STREET FORT WAYNE, IN 46802 ERIE INSURANCE EXCHANGE 100 ERIE INSURANCE PLACE ERIE, PA 16530

FELGERS PEAT MOSS 9912 VALENTINE ROAD FORT WAYNE, IN 46818

FORT WAYNE RADIOLOGY C/O AMERICOLLECT, INC. PO BOX 1566 MANITOWOC, WI 54221

GRABER LUMBER 17528 CUBA ROAD SPENCERVILLE, IN 46788

INDIANA SURGICAL SPECIALISTS C/O BECKMAN LAWSON, LLP 201 WET WAYNE STREET FORT WAYNE, IN 46802

JAMES D BOSCIA 02D01-1005-SC-008351 8605 BROADWAY MERRILLVILLE, IN 46410

LAWNSCAPE MANAGEMENT INC C/O MARLIN BENSON 505 LAKE AVENUE FORT WAYNE, IN 46805

LVNV FUNDING LLC C/O CHARLIE W GORDON PO BOX 398 JEFFERSONVILLE, IN 47131

MCKENZIE LAWN
SPENCERVILLE, IN 46788

MIDLAND FUNDING LLC 2365 NORTHSIDE DRIVE SUITE 300 SAN DIEGO, CA 92108

MOHELA/DEPT OF ED 633 SPRINT DRIVE CHESTERFIELD, IL 60335-1243

PARKVIEW MEMORIAL HOSPITAL C/O MSCB INCORPORATED 1410 INDUSTRIAL PARK ROAD PARIS, TN 38424

PARKVIEW MEMORIAL HOSPITAL C/O MSCB INC. PO BOX 1567 PARIS, TN 38242

PERRY LAW OFFICE 02D01-1503-SC-004313 5532 SAINT JOE ROAD FORT WAYNE, IN 46835

PFISTER SPRINKLER SYSTEMS INC PO BOX 99 ROANOKE, IN 46783

PREMIER AUTO 918 SOUTH ANTHONY BOULEVARD FORT WAYNE, IN 46803

PROFESSIONAL EMERGENCY PHYSICIANS C/O PROFESSIONAL RECOVERY 7319 W. JEFFERSON BLVD FORT WAYNE, IN 46804

ROBERT JOHN WRAY 02D02-1410-SC-016656 5750 COVENTRY LANE B-5 FORT WAYNE, IN 46804 SARAH LOUISE BLAKE 02D01-1210-SC-020593 COURTHOUSE BOX 0008 FORT WAYNE, IN 46802

SHELL POINT
75 BEATTIE PLACE
GREENVILLE, SC 29601

SNOW & SAUERTEIG 203 E BERRY ST STE 1100 FORT WAYNE, IN 46802

SNOW & SAUERTEIG COLLECT 203 E BERRY ST FORT WAYNE, IN 46802

ST JOE HEALTH SYSTEMS C/O SNOW&SAUERTEIG LLP 203 EAST BERRY STREET FORT WAYNE, IN 46808

ST JOSEPH HOSPITAL C/O SNOW & SAUERTEIG 203 EAST BERRY STREET SUITE 1310 FORT WAYNE, IN 46802

ST JOSEPH HOSPITAL C/O SNOW & SAUERTEIG 203 EAST BERRY STREET FORT WAYNE, IN 46802

SUMMIT RADIOLOGY C/O SNOW & SAUERTEIG 203 EAST BERRY STREET FORT WAYNE, IN 46802

SUMMIT RADIOLOGY PO BOX 2630 FORT WAYNE, IN 46801 SWISS COLONY / MONTGOMER 1515 S 21ST CLINTON, IA 52732

THOMAS L. STUCKY COURTHOUSE BOX 0007 FORT WAYNE, IN 46802

WELLS FARGO BANK AUTO PO BOX 29704 PHOENIX, AZ 85038

WELLS FARGO LOSS RECOVERY PO BOX 29704 PHOENIX, AZ 85038